

Legislative Council Staff

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Revised Fiscal Note

(replaces fiscal note dated March 10, 2023)

Drafting Number: LLS 23-0842 Date: March 29, 2023 **Prime Sponsors:** Rep. Brown; Titone **Bill Status:** House Appropriations

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Bill Topic: Summary of Fiscal Impact:	HEALTH FACILITY PATIENT INFORMATION DENIED SERVICE			
	•	☐ TABOR Refund ☐ Local Government ☐ Statutory Public Entity acilities to report on service availability at the individual el. The bill increases state revenue on an ongoing basis res in FY 2023-24 only		
Appropriation Summary:	For FY 2023-24, the bill requires an appropriation of \$64,627 to the Colorado Department of Public Health and Environment.			
Fiscal Note Status:	The revised fiscal note reflects the introduced bill, as amended by the House Health and Insurance Committee.			

Table 1 **State Fiscal Impacts Under HB 23-1218**

		Budget Year FY 2023-24	Out Year FY 2024-25
Revenue		-	-
Expenditures	General Fund	\$64,627	-
	Centrally Appropriated	\$13,052	-
	Total Expenditures	\$77,679	-
	Total FTE	0.7 FTE	-
Transfers		-	-
Other Budget Impacts	General Fund Reserve	\$9,694	-

Summary of Legislation

The bill requires certain health care facilities to submit data on service availability, including how frequently specific services are denied for non-medical reasons, to the Colorado Department of Public Health and Environment (CDPHE). The CDPHE must then develop forms to relay this information to the public by August 1, 2024, and every two years thereafter.

By October 1, 2024, the CDPHE must publish the forms on its website. Providers must present their form to patients as part of the informed consent process.

CDPHE is required to investigate any complaints of noncompliance and may issue fines.

State Revenue

To the extent that CDPHE fines health care facilities for noncompliance, the bill will increase state revenue. The fiscal note assumes that facilities will comply with the bill's requirements and that fine revenue will be minimal. Fine revenue is subject to TABOR.

State Expenditures

The bill increases state expenditures in CDPHE by \$78,000 in FY 2023-24 and minimally in subsequent years, paid from the General Fund. Expenditures are shown in Table 2 and detailed below.

Table 2 Expenditures Under HB 23-1218

		FY 2023-24	FY 2024-25	
Department of Public Health and Environment				
Personal Services		\$57,012	-	
Operating Expenses		\$945	-	
Capital Outlay Costs		\$6,670	-	
Centrally Appropriated Costs ¹		\$13,052	-	
	Total Cost	\$77,679	-	
	Total FTE	0.7 FTE	-	

¹ Centrally appropriated costs are not included in the bill's appropriation.

Department of Public Health and Environment. In FY 2023-24 only, CDPHE requires 0.7 FTE to promulgate rules, including rules that determine how the definition of "non-medical reason" applies to individual services and providers, and develop the form with input from stakeholders. This work must be completed on a condensed timeline to develop the form by August 1, 2024—see Technical Note. In subsequent years, workload will increase to investigate complaints of noncompliance, which can be accomplished within existing appropriations.

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Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. These costs, which include employee insurance and supplemental employee retirement payments, are shown in Table 2.

Technical Note

Amendment L.003 changed the timeline from December to August, but did not modify the year, and therefore tightened the deadline to develop the form. This revised fiscal note assumes that this was an error and the bill will be amended to extend the form development deadline to August 1, 2024.

Effective Date

The bill takes effect July 1, 2023.

State Appropriations

For FY 2023-24, the bill requires a General Fund appropriation of \$64,627 to the Colorado Department of Public Health and Environment, and 0.7 FTE.

State and Local Government Contacts

Behavioral Health Administration Information Technology Public Health and Environment Health Care Policy and Financing Law